



Employment History

Provide the following information about your current and past employers, assignments, or volunteer activities starting with the most recent. If your titles and duties changed substantially in the course of your service in any one organization, indicate such changes as separate employment. Explain any gaps in employment. If you need additional space, please attach a sheet of paper.

Employer	Telephone ()	Title	From (mo/yr)	To (mo/yr)
Address		Reason for Leaving		
Describe the Duties Performed			Starting Pay	Ending Pay
			\$	\$
Supervisor Name & Title	Telephone ()	May we contact?	per	per

Employer	Telephone ()	Title	From (mo/yr)	To (mo/yr)
Address		Reason for Leaving		
Describe the Duties Performed			Starting Pay	Ending Pay
			\$	\$
Supervisor Name & Title	Telephone ()	May we contact?	per	per

Employer	Telephone ()	Title	From (mo/yr)	To (mo/yr)
Address		Reason for Leaving		
Describe the Duties Performed			Starting Pay	Ending Pay
			\$	\$
Supervisor Name & Title	Telephone ()	May we contact?	per	per



Educational Background

School	Name & Location	Years Completed	Course of Study	Degree/Diploma
High School				
College				
Graduate Professional				

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Describe any job-related training received in the United States Military.

State any additional information you feel may be helpful to us in considering your application.

Specialized Skills (Check Skills/Equipment Operated)

Type WPM
 Microsoft Word
 Microsoft Excel
 Microsoft Publisher
 Microsoft Access
 Microsoft Front Page
 Microsoft PowerPoint
 Others: _____

References

List the names and telephone numbers of three professional references that have worked directly with you and are not related to you.

Name and Title	Telephone Number	Number of Years Known	Relationship (co-worker, etc.)



Relatives Employed by the Town of Brownsburg

List all relatives who work for the Town. (The employment of a relative is not a qualification for employment and will not result in preference in employment.)

Name	Relationship	Department/Location

Military Service

Branch of Service _____ Dates of Active Duty _____

From To

Rank at Date of Discharge _____ Type of Discharge _____

Dishonorable discharge is not an automatic bar to employment; all circumstances will be considered.

If dishonorable, explain circumstances _____

Terms of the Application for Employment

In consideration for the acceptance of my application and for consideration of employment with the Town of Brownsburg, I agree to assist and cooperate with the Town and any representative thereof in obtaining, compiling, and reviewing any necessary information that bears upon my suitability for employment. I also authorize and request that all persons to whom this document is presented having information relating to or concerning me furnish any duly appointed officer or individual of the Town with such information. I am aware that the information compiled may be of a personal nature and may otherwise be protected by my constitutional, statutory, or common law rights and privileges, and I expressly waive all privileges which may attach to such disclosure and shall hold no individual, organization, or other entity liable for disclosing any of the above information to the Town or its representatives.

I also understand that misrepresentation, falsification, or significant omissions of information on this or any other document or step which is part of the Town’s application process, or failure to assist and fully cooperate with the Town in obtaining the above requested information, will be cause for disqualification from consideration for employment, or if not found until after employment with the Town, will be grounds for termination of that employment. Consequently, I authorize the investigation of all statements contained in my application.

I understand that prior to employment, or from time to time during the course of my employment, I may be required to the extent permitted by law to take a drug or alcohol screen or similar test or examination and a condition of hiring or continued employment. I consent to any such screening and the release of the results to the Town of Brownsburg.

Applicant Signature

Date

**Town of Brownsburg
(EOE)**